| | PATENT A | ND | 09/343962 | | | | | | | | | |
|---|---|---|-------------------|---|------------------|-------|-----------------|--|-----|---------------------|------------------------|----------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | ALL I | ENTITY | OR. | OTHER SMALL | | |
| FO | R | | MBER FILED NUMBER | | XTRA | RATE | | FEE | | RATE | FEE | |
| BAS | SIC FEE | | | | | | | 345.00 | OR | 2000 | 690.00 | |
| 10 | TAL CLAIMS | 37 | minus 2 | 0= 17 | ` | XS | X\$ 9= | | OR | X\$18= | 316- | |
| ND | EPENDENT CL | AIMS 3 | minus | 3-: | | X | X39= | | OR | X78= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | 30- | | OR | +260= | _ | ŀ |
| • # | the difference i | TO | TAL | | OR | TOTAL | 996- |], | | | | |
| | CI | (Column 3) | SM | ALL | ENTITY | OR | OTHER | | ľ | | | |
| AMENDMENT A | | (Column 1) COUNTS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R/ | ATE | ADDI- TIONAL FEE | , | RATE | ADDI- TIONAL FEE | |
| | Total | • 37 | Minus | - 37 | - 0 | X | 9= | | OR | X\$18= | • | |
| E E | Independent | • 3 | Minus | ··· 3 | • 4 | × | 39= | | OR | X78⊃ | | |
| • | FIRST PRESE | NTATION OF M | ULTIPLE DEF | PENDENT CLAIM | | +1 | 30= | | OR | +260= | | |
| | , n | | | | | L, | TOTAL | | | YOTAL | | 1 |
| ايا |) 11 OS | (Column 1) | | (Column 2) | (Column 3) | ADDI | T. FEE | ţ | 3 | ADDIT. FEE | | 1 |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • 37 | Minus | - 37 | - / | XS | 9= | | OR | X\$18= | | |
| | Independent | · 3 | Minus | 3 | =/ | × | 39= | | OR | X78,2 | |] |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLÁIM | | | | | | | 30= | | OR | +260= | | |
| | | · | p | • | | | TOTAL T. FEE | | OR | TOTAL ADDIT. FEE | | 1 |
| 3 | -5 06 | (Column 1) | | (Column 2) | (Column 3) | | | | _ | | | |
| ENT C | * * * * * * | CLAIMS REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R/ | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |] |
| ğ | Total | • | Minus | ** | • | X | 9= - | | OR | X\$18= | | |
| AMENDME | Independent | • | Miras | 101 | • | X | 39= | | OR | X78= | | 7 |
| ۴ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 20- | | 1 | +260= | 1 | 1 |
| * If the entry in column 1 is less than the entry in column 2, write "O" in column 3. | | | | | | | 30= 101AL | ├ | OR. | TOTAL | | \dashv |
| | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE | | | | | | | | | | | |

LEST AVAILABLE COFT

Application or Docket Number